

Providing Quality Patient Care through Bedside Nurse Handoff & Shift Report

BACKGROUND

- Nursing handoff report is conducted multiple times daily, most notably at change of shift
- Nursing handoff report is an opportunity to reduce errors and ensure transmission of relevant patient information
- Ineffective handoff communication has been identified by the Joint Commission in greater than 60% of sentinel or catastrophic patient events
- Bedside nursing handoff:
 - allows patient to interact
 - maximizes proficiency of care delivery
 - improves patient safety
 - increases patient and family satisfaction
 - minimizes communication issues
- Many nurses are resistant to giving/receiving nursing handoff communication at the patient's bedside



PURPOSE

- To relocate change-of-shift nursing handoff report from the Orthopedic Unit nurses station to the patient's bedside
- To develop a structured format for nursing handoff to ensure consistent transmission of patient information

METHODS

- Design: Evidence-based, quality improvement project
- Participants/Setting: RNs on Orthopedic Unit
- Instrument: Bedside report pre/post survey
- Procedure:
 - Survey RNs on perceptions and practices regarding handoff/shift report, including bedside report
 - Develop education based on survey results & evidence
 - Provide education using posters, self learning modules & microteaching
 - Transition to bedside report
 - Monitor and collect data on:
 - Use of bedside report
 - Patient satisfaction (Press Ganey)
 - Staff satisfaction (post survey)
 - Falls
 - Incidental change of shift overtime

RESULTS

Bedside Report (BSR) - pre survey N=28	Strongly Agree/Agree
Excellent quality care delivered by RNs in Orthopedic Unit	28 (100%)
BSR during handoffs is best practice	23 (82%)
BSR improves patient safety	26 (93%)
BSR helps improve nurse-patient-family communication	25 (89%)
BSR is currently used at shift change	23 (82%)
BSR should be used at shift change and lunch breaks on ortho unit	23 (82%)
BSR improves patient satisfaction with nursing specific measures	23 (82%)
I enjoy & use BSR	24 (86%)

RESULTS

- 50% of RNs responding to the pre-survey had been on the Orthopedic Unit more than 10 years
- 61% of respondents worked days
- Percentage of time nurses used bedside report:
 - Always = 4 (14%)
 - Usually = 7 (25%)
 - Sometimes = 2 (71%)
 - Rarely = 1 (4%)
 - Almost never = 2 (7%)
- Benefits cited:
 - See patient's condition, provide for current needs
 - Visual assessments can be quickly done, early in shift
- Barriers identified:
 - Prolongs end of shift waiting for other RNs
 - More time to give the report

DISCUSSION

- BSR is a significant change to the current shift report practice and is not embraced by all RNs
- Data collection and project implementation delayed related to COVID-19
- Continue to roll out project to measure patient outcomes, satisfaction and overtime

CONCLUSIONS

Implementing bedside report on the Orthopedic Unit requires a coordinated approach involving education, inclusion of stakeholders, and monitoring of data related to nurse sensitive indicators and other outcomes.

REFERENCES

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